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ABSTRACT

The paper examines the causes of violent and other antisocial behavior in children. Considered are the effects of heredity and environment, and the nature and prevalence of learning disabilities in persons with antisocial behavior are noted. Effects of temperament and its relationship to stress are discussed. The author cites findings on potential changes in temperament and suggests that parents and teachers should make demands consonant with the child's temperament. A study on outcomes of antisocial youth indicates that this type of child contributes importantly to most major social problems: crime, drug addiction, and child abuse. Qualities that may predict antisocial personality are reviewed, including peer group pressure, sex, race, and parental behavior. Potential biological influences are also noted. (CL)

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ANTISOCIAL CHILDREN: WHY?

by

Boris Blai, Jr.

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Antisocial Children: Why ?

Fifty years ago, President Herbert Hoover opened a White House conference on child health and protection with these words: "... if we could have but one generation of properly born, trained, educated and happy children, a thousand other problems of government would vanish."

Today's antisocial child often becomes tomorrow's delinquent. He/she is also a prime candidate to end up an antisocial personality in adulthood. The prevalence of such antisocial behavior in our country is revealed in the following statistics:

1- In 1975, close to 2 million young people under 18 - about 20% of them girls - were arrested for offenses ranging from murder to vagrancy, and including burglary, larcency, vandalism, arson and assault.

2- Of all people arrested, almost half (45%) are under 18.

3- Almost 77,000 of America's inmates in prisons for adult offenses are under 18, costing taxpayers more than $17,000 annually per youth !

4- During the decade ending in 1974, the delinquency rate, according to the National Center for Juvenile Justice, rose by almost 59%.

When one considers the fact that many young delinquents are not apprehended and arrested, the magnitude of such antisocial behavior among the youth of our nation becomes starkly evident. There can be no doubt that vast, sweeping reforms are needed in our judicial system to deal with the rapid rise of violent crimes being committed by juveniles in our society today. Between 1960 and 1975, juveniles arrested for violent crimes such as homicide, rape, robbery, and assault increased some 293% and has been increasing some 10% each year since then. A more frightening aspect of the problem is that today more and more teenagers are resorting to the use of weapons in committing these crimes, and it is apparent that vandalism is definitely on the increase. Although youth violence may be more common in urban centers, suburban and rural juvenile crime is clearly increasing at a faster rate than is city crime among juveniles.

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Why do such substantial numbers of our youth 'go wrong' in their behavior, ending up with anti-social attitudes as adults - seemingly ingrained attitudes of distain for both the law and people? To seek an answer to that question we must ask even more fundamental ones: how lasting are the effects of early experiences on a growing child? And to what extent do the events of the first dew years of life influence the thinking, the emotional make-up, and the behavior of later years?

According to Dr. James Kagen, an eminent psychologist and professor of human development at Harvard University, a large number of American parents and psychologists assume that early experience has a permanent effect and that, as a result, the characteristics displayed by a child during the first 2 or 3 years of life are likely to be enduring.

Kagen does not believe this is true. Although he indicates that early environment is important, he stresses the fact that present environment can also have a powerful effect. In his words: "If the first environment does not permit the full utilization of psychological competencies, the child will function below his ability as long as he remains in that context. But if he is transferred to an environment that presents greater variety and requires more challenges, he seems more capable of exploiting that experience and repairing the damage wrought by the first environment than some theorists have implied and parents believed." (1)

If, as Kagen implies, the infant's characteristics are not necessarily stable, this has enormous implications for parental behavior in relation to the child's growth and development. As Kagen observes; "First, parents must be continually concerned with the infant's environment. Second, all of us should have greater faith that by changing the environmental circumstances for infants and children who show pathology, the children can be helped - the pathology can be remedied."

Kagan continues, by noting for people in the lower socio-economic classes of society who live in environments generally unfavorable for child-rearing:

(1) Kagan, J. The importance of simply growing older. New Society: June 14,1973.

"There has to be much more commitment on the part of the government and the public to improve the environments of these people and to give them greater hope. It would be inefficient to try to change the situation simply by working with each family. You want to change their living conditions and their hope for attaining some dignity in life, so that they will then commit themselves to their own future and have a greater expectation of success for their children." He further advises: "Be concerned with the early years but do not despair of a child who had a neglected, hostile, or isolated infancy. Change and growth are the primary characterization of living systems."

As for the role of heredity as a behavioral determinant, Kagen concludes: "The differences between species are fundamentally hereditary. But as for differences within a species - in man, for example, differences in factors such as kindness, aggressiveness, choice of vocation; even IQ - it is not clear how much can be attributed to heredity." (2)

Two very comprehensive studies investigating tje roots of violent and other antisocial behavior in both children and adults were conducted by Lee N. Robins, research professor of sociology in psychiatry, Washington University School of Medicine in St. Louis. In one study, more than 500 patients who were seen at a St. Louis child guidance clinic in the 1920s were followed into their fourties. (A group of 100 matched controls was used). In the second study, more than 200 normal, young black males were followed into their thirties. A number of years later Robins and her associates also examined the school and juvenile police records of many of the original subjects' children who were over 18.

This research answered a number of major questions relating to antisocial behavior. These findings are summarized below.

Does antisocial personality in adulthood get an early start in the antisocial individual? Dr. Robins answers that in childhood; "The people we have studied have

(2) Ibid

been mostly lower class ... and have had a lifetime of exposure to hardship. ... If they did not respond with psychopathic symptoms when exposed to such an environment in childhood, they did not begin to do so as adults." (3) It is also Dr. Robin's view that antisocial personality.. "apparently cannot begin in adulthood. A diagnosis of adult antisocial personality was never made," (3) unless there had been marked antisocial behavior before age 18.

Robins also stresses that the onset of such antisocial behavior was usually early in childhood - especially so among boys. In her words: "Most boys began having obvious difficulties as soon as they began attending schools. The first signs were truancy , failure to perform well academically despite adequate IQs, stealing, and disciplinary problems in the classroom." (4)

Most people have heard the term "learning disability". Many labels have been created to describe learning disabilities: brain damage, cognative perceptual motor defect, minimal brain dysfunction, dyslexia, cognative word blindness, and others. Whatever the label, most learning disabilities hamper a child's ability to read. Even though the youngster may have average or above-average intelligence and may have no physical handicaps, for some reason a child with a learning disability has difficulty with reading.

The condition of being afflicted with a learning disability can seriously affect a child's mental health. Learning disabilities are frustrating and may easily lead a child to believe that he is a failure, not only in reading and learning, but in everything he tries.

This condition of being learning disabled presents a serious problem for educators, parents, and the children themselves. It is at the root of reasons most often given for dropping out of school, and it has been estimated that at least 75% of children who end up in juvenile detention centers have some type of learning disability. A study at the University of Rhode Island revealed that early detection

(3) Robins, L.N. Antisocial behavior disturbances of childhood: Prevalence, programs, and prospects. In: Anthony Kovpernik, ed. The Child in his Family - Children at a Psychiatric Risk. New York: Wiley. 1974.
(4) Ibid.

of neuropsychological problems - evidently mainly in the form of previously unnoticed and untreated learning disabilities - is significantly related to subsequent juvenile delinquent behavior. Early detection and treatment of such learning disabilities can, and does, affect the future rate of juvenile delinquency among such youngsters.

The effects of temperament on the mental health of children and of the adults these children become is very substantative. By temperament we refer to a psychological trait, probably best defined as 'behavioral style'. It strongly influences the development of personality. Also - the way that parents and others respond to a child's temperament can help determine whether the child's behavior will be deviant, (which includes antisocial behavior), or normal. Although temperament is a most important attribute, it alone cannot 'explain' problem behavior. Such aspects as the child's abilities and motivation must also be considered. In addition, Drs. Alexander Thomas and Stella Chess of New York University School of Medicine, in a major research project extending over 20 years, found that behavior problems (marked by delinquency, hostility, rebellion, or anitsocial behavior), most often arose because parents did not know how to handle a difficult or a slow-to-warm up child, (i,e. one who adapts slowly and tends to withdraw from new situations). And the problems continued because the parents were either unable or unwilling to follow professional guidance.

Of those children with a behavior disorder in childhood, some 42 cases, about half of them had recovered by adolescence and one-third had grown worse. The parents of those who recovered had followed psychiatric advice and reduced stress on the child - the stress that is created by expectations which did not harmonize with the child's temperament. In the main, the parents of the other children did not. Adolescence for these children was accompanied by five new cases of behavioral disorders whose symptoms included depression, hostility, rebellion, or antisocial behavior, and their symptoms were more severe than those that had become apparent

at an earlier age.

What is the basis for such differences in temperament? A Norweigian investigator, Anna Marie Torgersen, found, in a study of idential and nonidentical twins, that the answer, in part, rests with genetic differences. Further - a National Institute of Mental Health-supported study by Arnold J. Sameroff and Melvin Zax at the U niversity of Rochester found four material variables that correlated with difficult temperaments in children at age 4 months. These were: (1) a high level of anxiety in the mothers (as measured before the birth of the child); (2) black race; (3) low social class; (4) large number of children in family.

Further evidence of heredity's role in temperament is to be found in a New York study of Puerto Rican children from working-class families. Despite some marked differences in child-rearing practices, much the same distribution of temperamental characteristics as among the University of Rochester study among middle-class and upper-middle class were found among these two samples.

However, investigators are careful to note that attempts to predict what children will be like, years ahead, on the basis of their present temperamental characteristics and environment are usually not successfully. In short, they find that although temperament seems to be innate, it can and often does change.

Among children studied, major temperamental traits have persisted into adolescence - in many cases. Yet, there are many others in which they have not. In explanation, these researchers point out, (as was noted earlier), that temperament interacts with the two other major characteristics; a child's motives and abilities. These three dimensions in turn interact with a child's environment, the results being that individual's pattern of behavior. In the course of this process of the child interacting with its environment, a specific temperament trait, (for example - sullenness), may or may not be retained.

As a case in point, if the child responds to a shift in its environment, (less parental pressures), by abandoning its former sullen behavior - this temperament

trait, formerly characteristic of the child's responses to its environment, is dampened and may fade away, possibly even disappearing entirely.

It is quite evident, from the variety of responses to environmental changes that no one aspect of a child is necessarily an important factor in the development of behavior problems. Additionally, the emergence of new factors in either the child or his environment can decisely influence the child's course of development. Problems of temperament cannot only persist but also, when understood, can be overcome. With regard to parental responses to the temperament of their children, since temperament, in reaction with other factors, so strongly helps to shape behavior in the developing child, psychiatric researchers suggest that parents should try to make their demands and expectations consonant with the child's temperamental characteristics. The gist of this advice may be quickly stated: parents, teachers, and other adults should recognize what a given child <u>can and cannot do</u>, and then should simply act accordingly.

The slow-to-warm up child should be allowed to adapt to his new surroundings at his own speed. Pressure to move quickly into new situations may only strengthen his tendency to withdraw.

Youngsters who rank low in persistence and high in distractibility should be encouraged to function up to their abilities. Conversely, persistent and non-distractible children should be warned well ahead of time when they will be required to drop what they are doing. And finally - children with difficult temperaments need to be handled with an exceptional amount of patience, firmness, and understanding if they are ever to learn appropriate behavior.

* * * * * * * * * * *

As was noted earlier, a typical antisocial child first draws attention because of difficulties during the school years and, as Dr. Robins points out, there are many anecdotal accounts of problems dating from infancy. Specifically she notes: "The fact that we do not know whether onset is really at birth is a serious lack

in trying to understand the etiology. If it is truely a disorder with which one is born, the social environment would have to be seen as at most a modifying, rather than an instigating factor." (5)

In general, how do antisocial children turn out? Of the 500 patients who were seen in the St. Louis child guidance clinic because of antisocial behavior, 25% turned out to be antisocial adults; 9% were alcoholics or drug addicts; and 11% were psychotic. Only 16% recovered by age 18 and had no further psychiatric problems by the age of 40. This, reports Robins: "was in marked contrast both to children referred to the clinic for reasons other than antisocial behavior, who were more often than not well and rarely sociopathic adults, and to a comparison group of normal school children, 60% of whom were well and only 2% sociopathic." (6)

The antisocial child, Robins emphasizes, ... "contributes importantly to most of our major social problems ... and it is from antisocial children that a very high proportion of the prisoner population comes as do many of our vagrants, our skid row inhabitants, those drug addicts who resort to crime to support their habits, and even substantial proportions of those psychotic adults who require restraint because of their aggressive and combative behavior. ... Also from this group comes many of the parents of those children end up on welfare roles, as wards of the State, or as adopted children, because the parents simply do not provide sufficient financial or affectional care for them. These negrected, impoverished, or adopted offspring themselves have a very high risk of childhood antisocial behavior disorders. ... Thus the high frequency of antisocial disorders in the child population is preserved from one generation to the next." (7)

As Robins emphasizes, in conclusion, these findings have substantial implications for public policy, for they support the view that if one could interpret the antisocial patterns so readily discernable by children's parents, teachers, and peers, one might greatly reduce the scope of the world's social problems.

(7) Ibid.

Are there then childhood symptoms that predict adult delinquency? Although no one symptom marked everyone who became delinquent, some symptoms were very common. In more than half of the cases, Robins notes that these included,... "theft, incorrigibility, running away from home, truancy, associating with other delinquent children, staying out past the hour allowed, discipline problems in school, and school retardation." (8) In addition, symptoms less common, but nonetheless significantly more frequent than in controls, included: fighting, recklessness, slovenliness, enuresis, lying for no apparent gain, failure to show love, and an inability or unwillingness to show guilt over disturbing behavior.

It was further noted that none of these behaviors was an infallible predictor of antisocial personality, (also known as sociopathy or psychopathy). These behaviors were also found in some of the children who did not become antisocial adults. "Instead", Robins reports, "less than half of even the most antisocial children" were diagnosed sociopathic when followed up years later. However, virtually none of these adults was adjudged psychiatrically healthy.

A far better predictor of eventual adult delinquency was the number of symptoms rather than any particular symptom or combination of symptoms. The more antisocial symptoms a child showed, (e.g. lying, stealing, truancy, etc.), the more likely he was to become an antisocial adult.

In 1975, Robins examined the three factors of sex, race, and parental behavior, and found that each had a substantive influence as causes for antisocial behavior. Among antisocial children, she reports, boys outnumbered girld four to one or better. "Furthermore, girls who do have behavior problems tend to come from families that are worse than the boys', suggesting that girls may have a higher threshold of vulnerability to genetic and/or environmental factors ... or that girls experience more parental control than boys even in relatively disrupted families." (9)

(8) Ibid.

(9) Robins, L.N. "Etiological implications in studies of childhood histories relating to antisocial personality." In: Hare, R.D. & Schalling, D; eds. Psychopathic Behavior: New York, Wiley, 1979

As for the racial factor, Robins notes that black children, compared with white, have higher rates of schooldropout and of juvenile delinquency and, when refered to child guidance clinics, are more often seen for conduct disorders and less often for neuroses. "However", Robins notes, "racial discrimination as reflected in poorer quality of education, police prejudice, or psychiatrists' stereotypes might explain some or all of these differences." In addition, Robins also cites a 1974 study of English school children which found that both parents and teachers of blacks and whites reported higher rates of antisocial behavior among the former. It does seem likely that these differences are rooted in the unsimilar social climates usually encountered by the members of these two races.

Regarding the third dimension, parental behavior, as might be expected, parents had an influential role. Whether this role was genetic in nature, or environmental - or both - antisocial parents produced a significantly greater proportion of delinquent youngsters. Among white males who were 17 by 1959, the delinquency rate for those having an antisocial parent was 28%; for the others only 13%. Similarly, among black males who were 17 by 1973, the delinquency rate was 43% if either parent was antisocial; otherwise the rate was zero ! Among black females, 24% of those whose fathers had been arrested at least once were delinquent, but none of those whose fathers had not been arrested were delinquent.

In contrast, however, the relationship between parental behavior and the diagnosis of antisocial personality in the offspring as an adult (after 18) did not reveal the same pattern. Among both black and white children who were highly antisocial, the existence of 'conforming' (i.e. people who were not antisocial) parents did not reduce the risk that these children would develop into antisocial adults. Likewise - when children were very conforming, the existence of extremely deviant parents did not increase that risk.

In summary - Robins found the effect of parents in either increasing the risk by being deviant themselves or in decreasing it by being conforming, was clearest

among children in the middle range of antisocial behavior.

In contrast to popular belief, Robins found no reason to indict the broken home as a major factor in the development of antisocial personality. She notes:

> "Our data suggest that the broken home is in fact an unimportant variable that is correlated with outcome only because antisocial parents usually separate. The child's experiencing the break itself does not seem to be the critical factor. Death of parents without problems led to no increased risk of antisocial personality, nor did we find that children's being early separated from an antisocial parent reduced the risk. Since amount of exposure to the parents seemed to have little effect, either negatively or positively, perhaps we should look to genetic factors, perinatal factors, and very early influences rather than to the experience of growing up in the parents' household as the critical factor." (10)

A further surprize in the Robins investigation was the finding that low social class did not add much to the ability to predict antisocial personality, once the parents' and child's own behaviors were taken into account. And another popular theory, one engraved in folk wisdom, was not supported by the Robins study: this is the belief that a child's undoing can often to traced to bad companions. As Robins points out, this belief ... "must be treated with much caution" for the bad companions, instead of having led the child astray, may have been selected by him - after his problem behavior began, precisely because of a similarity of interests. "Whether children engage in antisocial acts independently or in gangs," Robins notes, "they had approximately the same risk of antisocial behavior later on. Similarly, we found no effect of the neighborhood delinquency rate on the chances that the black school boys we studies would develop delinquency." (11)

In brief, Robins' research suggests that ... "at best, peer group pressure or or imitation may be a necessary but not a sufficient condition to explain delinquency." She adds - that nondelinquent parents ... "apparently were able to innoculate their child against enticement into delinquent activities even in the high delinquency areas to which housing segregation confined most blacks." (12)

Turning to another dimension of antisocial behavior, does the type of parental discipline affect the child's behavior? The Robins study revealed that whem

(10) Ibid
(11) Ibid.
(12) Ibid.

parents used "adequate" discipline, (also described as "love-oriented"), only 9% of the boys referred to child guidance clinics turned out as adults with a sociopathic, or antisocial personality. Precisely the same outcome occurred when parental discipline was too strict; (some investigators use the word "punitive"). When parents were "too lenient", or exerted no discipline because they were uninterested in the child, the adult antisocial personality rate was 30%.

These results, Robins indicates, confirm the earlier findings of William and Joan McCord that both love-oriented and punitive discipline ... "militate against convictions and incarcerations, while excessive leniency, inconsistent discipline, and disinterest are asscciated with records of convictions." Moreover, "when supervision during the teenage period was described as adequate, only 9% were later diagnosed sociopathic personalities." (13) This rate about doubled among children who were sometimes supervised and sometimes not. And it more than triped when they were supervised little, if at all !

Is is possible then to prevent delinquency? The above-cited findings are strong evidence that some type of discipline and parental attitudes are far more effective than others in discouraging antisocial behavior. In a recent-year analysis by Robins and an associate, Eric Wish, of the development of deviance in Robins' black male subjects, some additional light on this question is provided. By studying the sequences of deviant behaviors in these children they found that certain behaviors manifested quite early could be used to predict antisocial behaviors later on. Among these - absence from school in the earliest years was linked both to dropping out of school in later years and to leaving home. Drinking alcohol before the age of 15 was also linked correlationally to leaving home.

Robins and West report: "If there is a practical message in our efforts, it is that centering efforts on preventing truancy in the first and second grade and drinking before 15 is likely to have the gfeatest payoff at least cost." (14)

(13) Ibid.

(14) Robins, L.N. & Wish, E. "Childhood deviance as a developmental process: A study of 223 urban black men from birth ro 18." Social Forces. Dec. 1977.

Yet another aspect relating to antisocial behavior is to be found in the answer to the question - does separation from family have an effect upon the etiology of antisocial behavior? Michael Rutten, a noted English child psychiatrist, concludes that the separation of a child from family does have "some association" with the later development of antisocial behavior. However, in his view this is caused not by the separation itself but by .. "the family discord which precedes and accompanies it." Such discord need not be active, it may simply be marked by lack of affection. The effects are the same. "However" he notes, "a good relationship with one parent can go some way toward mitigating the harmful effect of a quarrelsome unhappy home." (15)

On the basis of his own studies, as well as others relating to permanent separations, Rutter concludes that over all, "children from a broken home have an increased risk of delinquency." He cites findings from three studies that .."the delinquency rates are nearly double for boys whose parents have been divorced or separated ... but for boys who had lost a parent by death the delinquency rate was only slightly (and non-significantly) raised." (16)

In both permanent and transient separations, the link between the separation and antisocial behavior seems to be not the separation itself but the discord and disharmony leading to it. This influence of discord and disharmony even carries through to children who have been separated from their parents. When they find themselves in new family situations which were poor, the rate of antisocial disorder was double ?

Just why and how does family discord interact with a child's temperamental characteristics to produce antisocial behavior? Rutter suggests several possibilities. First, parents of delinquents may differ in the way they supervise and discipline their children. Parental discord may be important only to the extent that it is "associated with erratic and deviant methods of bringing up children."

(15) Rutter, M. "Parent-child separation: Psychological effects on the children". J. Child Psychiatry. 12:233-260. 1971.

Second - laboratory studies have shown that children, after watching someone behaving aggressively or deviantly, tend to go and do likewise. Perhaps, then, parental discord is linked to an antisocial outcome in the child simply because it gives him a model of hostility and antisocial behavior to copy.

And finally - Rutter says that perhaps "the child learns social behavior through having a warm, stable relationship with his parents", and this relationship "provides a means of learning how to get on with other people." (17)

In addition to the social and cultural factors associated with violence and other antisocial behavior, in recent years a number of investigators have suggested that young people prone to violent behavior may differ from normal young people in the activity of their hormones and neurotransmitters. In concert - these investigators are really posing the same basic question - is there evidence o biological factors as determinants of antisocial behavior?

Psychiatrist Derek Miller of the U niversity of Michigan Medical School hypothesized that inappropriate hormonal responses to stress are produced in some violent youths. He supports his hypothesis with observations that such individuals tend to think of people as things instead of as human beings. Therefore, in consequence of such views, they do not appear to get excited when acting violently. Miller further belueves that although such an attitude does not always lead to violence, it does if the person is genetically vulnerable to it and has relevant nurturing experience; i.e. parents who frequently use physical force without explanation.

Data compiled by University of Virginia School of Medicine psychiatrist Ake Mattson is consistent with Dr. Miller's theory. He found that the tendency of delinquent boys to have lower cortisol excretion than other boys helps to explain their low level of excitement. However, he expressely emphasized the fact that almost all of the delinquent boys had very disruptive early family lives.

(17) Ibid.

Strong evidence also exists that delinquent boys show other physiological differences. Psychiatrist Peter H. Wolff of the Children's Hospital Medical Center in Boston, and his associates, found in one project that boys whose delinquency brought them into trouble with the law have a much higher incidence of choreiform twitch at an age when most other boys have outgrown it. Choreiform twitch is a slight motor instability: for example, when reading, his eyes will be focusing on one part of the page when the extraocular muscles may give a sudden twitch and shift the focus elsewhere for an instant.

Dr. Wolff and his fellow investigators also found, among a group of 15 delinquent boys, (ages 14½ - 15½), that all 15 ranked in the lowest 5% of all boys their age in the Lincoln-Oseretski test of motor maturation. Among a control group of 15 youth who were normal youngsters of the smae age as t he delinquents, all but one of these scored in the highest 30%. And finally, when the Lincoln-Oseretski test was administered to 15 boys being treated for learning disabilities, all but one placed just the same as the delinquents - in the lowest 5% of the population. And a most significant benchmark - the IQs of all of the boys in these three gtoups were normal or above.

On the basis of these and other studies, Dr. Wolff's group suggests that.. "children with delayed or disturbed neuromuscular development are more likely to be identified as delinquesnt when they grow in a lower-class context, and to be identified as children with learning disabilities when they come from a middle-class environment."

Allan Berman believes that three broad determinants 'make' the juvenile delinquesnt: the existence of a learning disability; the failure of parents and school personnel to detect the deficiency or dysfunction; and the existence of a non-supportive family. However, the various researches reported here clearly indicate that additional dimensions must also be considered. These embrace such factors as biological elements; familial relationships - including separations; temperament characteristics; types of parental discipline; and early childhood behavioral

patterns.

Few today would question that the family is usually at the core of a youngster becoming a juvenile delinquest. Unintention and even intentional emotional and physical neglect will almost invariably lead a youngster to seek satisfaction , (i.e. affection and recognition ?), elsewhere. However, satisfactory family relationships alone will not necessarily 'cure' a juvenile delinquent. On the other hand, evidence exists that such sound familial relationships can contribute to sharp reductions in the number of early-age, anti-social children who deteriorate, socially, and become juvenile delinquests. Perhaps the most essential part of the 'cure' for a juvenile delinquest is - someone who cares !

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